Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF MISSOURI	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on	Crystal		
	your government-issued picture identification (for example, your driver's	First name Middle name		First name
	license or passport).			Middle name
	Bring your picture	Hardin		
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6402		

Debtor 1 Crystal Hardin

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs			
5.	Where you live	62 West Cardigan Drive	If Debtor 2 lives at a different address:			
		Saint Louis, MO 63135 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
	Saint Louis		2			
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Debtor 1 Crystal Hardin Pg 3 of 70 Case number (if known)

Par	Tell the Court About	Your Ba	ankruptcy Ca	se					
7.	The chapter of the Bankruptcy Code you are			rief description of each, see go to the top of page 1 and o			C. § 342(b) for Individu	uals Filing for Bankruptcy	
	choosing to file under	■ Chapter 7 □ Chapter 11							
		☐ Ch	napter 12						
		☐ Ch	napter 13						
8.	How you will pay the fee		about how you	u may pay. Typically, if you a attorney is submitting your p	are paying	the fee yourself,	you may pay with cash	r local court for more details n, cashier's check, or money n a credit card or check with	
				the fee in installments. If y	you choos	e this option, sign	and attach the Applica	ation for Individuals to Pay	
			J	e in Installments (Official For	,	deta and an anti-	(Jan 7 Declare a Sedan man	
			but is not requapplies to you	t my fee be waived (You ma uired to, waive your fee, and or family size and you are un on to Have the Chapter 7 Filin	may do so able to pay	only if your inco the fee in install	me is less than 150% oments). If you choose	of the official poverty line that this option, you must fill out	
9.	Have you filed for bankruptcy within the last 8 years?	□ No							
			District	Eastern District of Missouri	When	2/03/15	Case number	15-40657	
			District	Eastern District Of Missouri	When	2/28/14	Case number	14-41371	
			District	See Attachment	When		Case number		
10.	Are any bankruptcy	■ No							
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	S.						
			Debtor				Relationship to y	/ou	
			District		When		Case number, if	known	
			Debtor				Relationship to y	/ou	
			District		When		Case number, if	known	
11.	Do you rent your residence?	■ No	Go to li	ne 12.					
	residence :	☐ Ye	s. Has you	ur landlord obtained an evict	ion judgm	ent against you?			
				No. Go to line 12.					
				Yes. Fill out <i>Initial Statemer</i> this bankruptcy petition.	nt About ar	n Eviction Judgme	ent Against You (Form	101A) and file it as part of	

Debtor 1 Crystal Hardin Pg 4 of 70 Case number (if known)

Part	Report About Any Bu	sinesses	You Owr	as a Sole Proprie	tor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	and location of bus	iness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach Number, Street, City, State & ZIP Code sole proprietorship, use a separate sheet and attach			e & ZIP Code		
	it to this petition.		Chec	k the appropriate bo	x to describe your business:	
				Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))	
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))	
				None of the above		
Chapter 11 of the deadlines. If you indicate that you are a small				ndicate that you are one of the order of the	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure	
	For a definition of small	■ No.	I am r	not filing under Chap	oter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.			
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Part	4: Report if You Own or	Have Any	Hazardo	ous Property or An	y Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is	the hazard?		
	identifiable hazard to public health or safety? Or do you own any					
	property that needs immediate attention?			liate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?		
					Number, Street, City, State & Zip Code	

Debtor 1 Crystal Hardin

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Par	t 6: Answer These Quest	ions for Rep	porting Purposes		Dei (II known)			
	What kind of debts do you have?	i	ndividual primarily for a perso	nsumer debts? Consumer debts are denal, family, or household purpose."	efined in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
				siness debts? Business debts are deb treatment or through the operation of the be				
		I	☐ No. Go to line 16c.	• .				
		I	☐ Yes. Go to line 17.					
		16c. S	State the type of debts you ow	ve that are not consumer debts or busin	ness debts			
17.	Are you filing under Chapter 7?	□ No. I	am not filing under Chapter 7	7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and			o you estimate that after any exempt pri ilable to distribute to unsecured creditor	operty is excluded and administrative expenses rs?			
	administrative expenses	I	No					
	are paid that funds will be available for distribution to unsecured creditors?	I	☐Yes					
18.	How many Creditors do you estimate that you owe?	□ 1-49		1 ,000-5,000	1 25,001-50,000			
		50-99		☐ 5001-10,000	☐ 50,001-100,000			
		☐ 100-199 ☐ 200-999		☐ 10,001-25,000	☐ More than100,000			
19.	How much do you	■ \$0 - \$50	0,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?	□ \$50,001 - \$100,000		□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
			01 - \$500,000 01 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.	How much do you	□ \$0 - \$50	0,000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		1 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
			01 - \$500,000 01 - \$1 million	☐ \$100,000,001 - \$500 million	☐ \$10,000,000 - \$50 billion ☐ More than \$50 billion			
Par	t7: Sign Below							
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
				I am aware that I may proceed, if eligib lief available under each chapter, and I	le, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7.			
			f no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request re	elief in accordance with the ch	napter of title 11, United States Code, sp	pecified in this petition.			
		bankruptcy and 3571.	case can result in fines up to		y or property by fraud in connection with a 0 years, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		/s/ Crystal H		Signature of Deb	otor 2			
		Signature of		-				
		Executed of	October 29, 2019 MM / DD / YYYY	Executed on	MM / DD / YYYY			

Debtor 1 Crystal Hardin Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Robert	Faerber	Date	October 29, 2019	
Signature of	Attorney for Debtor		MM / DD / YYYY	
Robert Fa	erber			
Printed name				
Robert Fa	erber			
Firm name				
230 S. Ber	mistion			
Suite 600				
Saint Loui	is, MO 63105			
Number, Street,	City, State & ZIP Code			
Contact phone	(314)727-3434	Email address	faerber@msn.com	
Contact prioric	(014)121 0404		Tuoi boi @illolli.com	
46794 MO				
Bar number & S	tate			

Debtor 1 Crystal Hardin Pg 8 of 70 Case number (if known)

Fill in this infor				
Debtor 1	Crystal Hardin			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT C	F MISSOURI	
Case number (if known)				☐ Check if this is an amended filing

FORM 101. VOLUNTARY PETITION

Prior Bankruptcy Cases Filed Attachment

District	Case Number	Date Filed
Eastern District of Missouri	15-40657	2/03/15
Eastern District Of Missouri	14-41371	2/28/14
Eastern District Of Missouri	11-40913	2/04/11
Eastern District Of Missouri	09-41340	2/20/09
Eastern District Of Missouri	02-46379	6/07/02
Eastern District Of Missouri	91-45919	9/18/01
Eastern District Of Missouri	96-50001	12/26/96
Eastern District Of Missouri	94-41020	2/23/94

Fill in this infor					
Debtor 1	Crystal Hardin				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		EASTERN DISTRICT C	OF MISSOURI		
Case number					
(if known)					Check if this is an
					amended filing
				-	ŭ

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

2/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
		Your as	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	4,267.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	4,267.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	86,723.78
	Your total liabilities	\$	86,723.78
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,685.41
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,558.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

Debtor 1 Crystal Hardin Pg 10 of 70 Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total o	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	1,341.75
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	1,341.75

Entered 10/30/19 15:07:37 Case 19-46834 Doc 1 Filed 10/30/19 Main Document

Fill in this information to identify your case and this filing: **Crystal Hardin** Middle Name Last Name First Name First Name Middle Name Last Name

United States Bankruptcy Court for the:	EASTERN DISTRICT OF MISSOURI	
Case number		Check if this is an
		amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part	Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In
1. D o	you own or have any legal or equitable interest in any residence, building, land, or similar property?
_	No. Go to Part 2. Yes. Where is the property?
Part	2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

- 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles
 - No

Debtor 1

Debtor 2

(Spouse, if filing)

- ☐ Yes
- 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories
 - No
 - ☐ Yes
- 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....

\$0.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own? Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

- □ No
- Yes. Describe.....

Debtor 1 Crystal Hardin

Case number (if known)

	House	hold	aoo	d
--	-------	------	-----	---

The valuation of this property is based on an estimation of a hypothetical liquidation estate sale (yard sale). The value factors in varying age, wear and tear, and depreciation of the property considering the length of time that the Debtor has owned the property. The valuation assumes that a significant portion of the Debtor's property of this category is depreciate to the point where it has no re-sale value whatsoever. This is a layperson's valuation. The Debtor has no professional or specialized knowledge on how to value property or the likelihood of sale in the event of liquidation. The Debtor expressly reserves the right to assert a different value for insurance purposes and replacement.

\$2,500.00

7	Electronics	
٠.	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections	tions; electronic devices
	including cell phones, cameras, media players, games ☐ No	
	Yes. Describe	
	Misc. Electronics	\$300.00
8.	Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or b other collections, memorabilia, collectibles	aseball card collections;
	■ No	
	☐ Yes. Describe	
9.	Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and k musical instruments	kayaks; carpentry tools;
	■ No □ Yes. Describe	
	Tes. Describe	
10.). Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
	■ No	
	☐ Yes. Describe	
	 ☐ Yes. Describe Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No 	
	Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	 Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No 	\$200.00
12.	 Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No ■ Yes. Describe 	·
12.	Clothes	silver
12.	Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe Wearing apparel Describes: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, No No	·

Filed 10/30/19 Entered 10/30/19 15:07:37 Case 19-46834 Doc 1 Main Document Pg 13 of 70 Debtor 1 **Crystal Hardin** Case number (if known) 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$4,050.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... **Academy Bank** \$167.00 Checking **Academy Bank** \$50.00 Savings 17.2. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No Institution name or individual:

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No

De	ebtor 1	Crystal Ha	ardin	Fg 14 01 70	Case number (if known)	
	☐ Yes		Issuer name and description.			
			ation IRA, in an account in a qualified), 529A(b), and 529(b)(1).	I ABLE program, or under a q	ualified state tuition prograr	n.
	☐ Yes		Institution name and description. Sepa	rately file the records of any inte	erests.11 U.S.C. § 521(c):	
	■ No	-	future interests in property (other the information about them	an anything listed in line 1), a	and rights or powers exercise	able for your benefit
26.			, trademarks, trade secrets, and othe lomain names, websites, proceeds from		nents	
		Give specific	information about them			
	Examp ■ No	oles: Building p	s, and other general intangibles permits, exclusive licenses, cooperative information about them	association holdings, liquor lice	enses, professional licenses	
Me	oney or p	oroperty owe	d to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No	unds owed to	o you nformation about them, including wheth	ner you already filed the returns	and the tax years	
	■ No	oles: Past due	or lump sum alimony, spousal support,	child support, maintenance, div	orce settlement, property settl	ement
30.	Examp	<i>les:</i> Unpaid w	eone owes you ages, disability insurance payments, dis unpaid loans you made to someone els		ion pay, workers' compensation	on, Social Security
	■ No □ Yes.	Give specific	information			
31.		ts in insurand bles: Health, di	ce policies isability, or life insurance; health savings	s account (HSA); credit, homeo	wner's, or renter's insurance	
	☐ Yes. I	Name the insu	urance company of each policy and list i Company name:	its value. Benefic	ciary:	Surrender or refund value:
32.	If you a		erty that is due you from someone w ciary of a living trust, expect proceeds fr		re currently entitled to receive	property because
	■ No □ Yes.	Give specific	information			
			I parties, whether or not you have file s, employment disputes, insurance clain		d for payment	
		Describe each	h claim			
34.	_	ontingent an	d unliquidated claims of every nature	e, including counterclaims of	the debtor and rights to set	off claims
	■ No □ Yes.	Describe each	h claim			

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Der	otor 1 Crystal F	iardin		Case number (if known)	
_		ts you did not already list			
	No				
L	Yes. Give specifi	c information			
36.		lue of all of your entries from Part 4, incl hat number here			\$217.00
Part	5: Describe Any Bu	ısiness-Related Property You Own or Have an	Interest In. List any real est	ate in Part 1.	
37. [Do you own or have a	ny legal or equitable interest in any business-	related property?		
	No. Go to Part 6.				
	Yes. Go to line 38.				
Part		rm- and Commercial Fishing-Related Property e an interest in farmland, list it in Part 1.	y You Own or Have an Intere	st In.	
46.	Do you own or hav	re any legal or equitable interest in any fa	arm- or commercial fishir	ng-related property?	
	No. Go to Part 7.				
	☐ Yes. Go to line 47				
Part	7: Describe A	l Property You Own or Have an Interest in Tha	nt You Did Not List Above		
53.	Do vou have other	property of any kind you did not already	list?		
		tickets, country club membership			
	No				
	Yes. Give specific	information			
54.	Add the dollar va	lue of all of your entries from Part 7. Wri	te that number here		\$0.00
Part	8: List the Tota	Is of Each Part of this Form			
55.	Part 1: Total real	estate, line 2			\$0.00
	Part 2: Total vehi		\$0.00		ψ0.00
		onal and household items, line 15	\$4,050.00		
	•	ncial assets, line 36	\$217.00		
59.	Part 5: Total busi	ness-related property, line 45	\$0.00		
		- and fishing-related property, line 52	\$0.00		
		r property not listed, line 54	+ \$0.00		
62.	Total personal pr	operty. Add lines 56 through 61	\$4,267.00	Copy personal property total	\$4,267.00
					_

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$4,267.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Crystal Hardin			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MISSOURI	
Case number (if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Specific laws that allow exemption

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Amount of the exemption you claim

Brief description of the property and line on

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the

ochedule A/B that had this property	portion you own			
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Household goods The valuation of this property is based on an estimation of a hypothetical liquidation estate sale (yard sale). The value factors in varying age, wear and tear, and depreciation of the property considering the length of time that the Debt Line from Schedule A/B: 6.1	\$2,500.00		\$2,500.00 100% of fair market value, up to any applicable statutory limit	RSMo § 513.430.1(1)
Misc. Electronics Line from Schedule A/B: 7.1	\$300.00	•	\$300.00 100% of fair market value, up to any applicable statutory limit	RSMo § 513.430.1(1)
Wearing apparel Line from Schedule A/B: 11.1	\$200.00	•	\$200.00	RSMo § 513.430.1(1)
Line nom <i>Schedule A/B</i> . 11.1			100% of fair market value, up to any applicable statutory limit	
Wedding ring Line from Schedule A/B: 12.2	\$1,000.00		\$1,000.00	RSMo § 513.430.1(2)
Life item contodulo /v.b			100% of fair market value, up to any applicable statutory limit	

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Brief description of the property and line on Schedule A/B that lists this property					Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
	Jewelry om Schedule A/B: 12.1	\$50.00		\$50.00	RSMo § 513.430.1(2)	
LINE	om Schedule A/B. 12.1			100% of fair market value, up to any applicable statutory limit		
	king: Academy Bank om Schedule A/B: 17.1	\$167.00		\$167.00	RSMo § 513.430.1(3)	
Lino	om concaule /v2. IIII			100% of fair market value, up to any applicable statutory limit		
	igs: Academy Bank	\$50.00		\$50.00	RSMo § 513.430.1(3)	
LINC	om ochedate A/B. TT-2			100% of fair market value, up to any applicable statutory limit		

Fill in this information to identify your case:								
Debtor 1	Crystal Hardin							
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
	ankruptcy Court for the:	EASTERN DISTRICT C	OF MISSOURI					
Case number (if known)					Chook if this is an			
(ii kilowii)					Check if this is an amended filing			

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

	Case	19-46834 D00	; i Filea		Entered 10/30/19 15:07:3	/ Main i	Jocument
Fill i	n this inforn	nation to identify your	case:	- g	19 01 70		
Debt	or 1	Crystal Hardin					
2021		First Name	Middle Na	me	Last Name		
Debt		First Name	Middle Ne		Loot Nome		
(Spous	se if, filing)	First Name	Middle Na	me	Last Name		
Unite	ed States Bar	nkruptcy Court for the:	EASTERN D	ISTRICT OF MI	ISSOURI		
Case (if know	e number			-			Check if this is an
						a	mended filing
Offic	cial Form	n 106E/F					
		:/F: Creditors W	ho Have	Unsecure	d Claims		12/15
any ex Sched Sched left. At	recutory cont lule G: Execut lule D: Credito ttach the Con	racts or unexpired leases tory Contracts and Unexp ors Who Have Claims Sec	that could resul ired Leases (Off ured by Property	It in a claim. Also ficial Form 106G) y. If more space i	RITY claims and Part 2 for creditors with NO o list executory contracts on Schedule A/B:). Do not include any creditors with partially is needed, copy the Part you need, fill it out report in a Part, do not file that Part. On the	Property (Offici secured claims , number the en	al Form 106A/B) and on that are listed in tries in the boxes on the
Part		ll of Your PRIORITY Un	secured Clain	ns			
		ors have priority unsecure					
	No. Go to P	art 2.					
	☐ Yes.						
Part	2: List Al	II of Your NONPRIORIT	Y Unsecured	Claims			
3. D	o any credito	ors have nonpriority unsec	ured claims aga	ainst you?			
	☐ No. You hav	ve nothing to report in this pa	art. Submit this fo	orm to the court wi	ith your other schedules.		
	Yes.						
u th	nsecured clair	m, list the creditor separately	for each claim. I	For each claim list	the creditor who holds each claim. If a credited, identify what type of claim it is. Do not list out have more than three nonpriority unsecured	claims already inc	cluded in Part 1. If more
	ı						Total claim
4.1	AAA Co	mmunity Finance		Last 4 digits of a	ccount number		\$350.00
	10824 S	/ Creditor's Name St. Charles Rock Id, MO 63074	,	When was the de	ebt incurred?		=
		treet City State Zip Code rred the debt? Check one.		As of the date yo	ou file, the claim is: Check all that apply		
	■ Debtor	1 only		☐ Contingent			
	☐ Debtor	2 only		☐ Unliquidated			
	☐ Debtor	1 and Debtor 2 only		☐ Disputed			
	At leas	t one of the debtors and and	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		ORITY unsecured claim:		
		if this claim is for a comm	nunity	Student loans			
	debt Is the clai	m subject to offset?		Obligations ari	ising out of a separation agreement or divorce t claims	that you did not	
	■ No	caspor to onder			ion or profit-sharing plans, and other similar del	bts	
	☐ Yes			•	4-13 payday loan		
				Canon Opcomy			-

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Deptor	Crystal Hardin	Case number (if known)	
4.2	Advance America	Last 4 digits of account number 0760	\$519.00
	Nonpriority Creditor's Name 10591 St. Charles Rock Road St. Ann, MO 63074	When was the debt incurred? 03/14	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify payday loan	
4.3	Ameren	Last 4 digits of account number 5229	\$896.14
	Nonpriority Creditor's Name C/O Consumer ADT Co. 4121 Union Rd., Ste. 201 St. Louis, MO 63129	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify 8-12 service	
4.4	Ameren Missouri	Last 4 digits of account number 5153	\$1,000.00
	Nonpriority Creditor's Name P.O. Box 88068 Chicago, IL 60680-1068	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify 9-14 service	

Debtor	1 Crystal Hardin	Case number (if known)	
4.5	Ameri Cash Loans	Last 4 digits of account number 6698	\$279.00
	Nonpriority Creditor's Name PO Box 184 Des Plaines, IL 60016	When was the debt incurred?	, 2
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset? ■ No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify 1-12 payday loan	
	Li Yes	Other. Specify 1-12 payday loan	
4.6	American Water Nonpriority Creditor's Name	Last 4 digits of account number 5113	\$451.00
	P.O. Box 94551 Palatine, IL 60094-4551	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify 9-13 service	
4.7	ARC	Last 4 digits of account number 9078	\$63.90
	Nonpriority Creditor's Name 2425 E. Thomas Road Phoenix, AZ 85016	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loans Obligations origing out of a congretion agreement or diverse that you did not	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	

☐ Yes

■ Other. Specify _2008 service

Debto	r 1 Crystal Hardin	Case number (if known)	
4.8	Arrow Finance Nonpriority Creditor's Name	Last 4 digits of account number 0785	\$1,311.00
	3528 Hampton Ave. St. Louis, MO 63139	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	■ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	_	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify 12-13 personal loan	
4.9	Arrow Finance	Last 4 digits of account number 6949	\$7,358.68
	Nonpriority Creditor's Name	When was the debt incurred? 2012	
	3528 Hampton St. Louis, MO 63139	when was the debt incurred? 2012	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	■ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	_	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify repossession	
4.1			
4.1 0	AT&T	Last 4 digits of account number 7593	\$387.00
	Nonpriority Creditor's Name	When we the debt incomed?	
	PO Box 537104 Atlanta, GA 30353	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only		
	At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	_	Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify 11-13 service	
	□ 162	Other, Specify II-13 361 VICE	

Debt	or 1 Crystal Hardin	Case number (if known)	
4.1	Aveta	Last 4 digits of account number 1502	\$184.00
1	Nonpriority Creditor's Name C/O Transworld 507 Prudential Horsham, PA 19044	Last 4 digits of account number 1502 When was the debt incurred?	\$104.00
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify 8-13 service	
4.1 2	Brish	Last 4 digits of account number 2BB1	\$525.00
<u> </u>	Nonpriority Creditor's Name 9417 Princess	When was the debt incurred?	·
	Tampa, FL 33619 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify 1-13 service	
4.1	Cash Advance	Last 4 digits of account number 8529	\$587.00
3	Nonpriority Creditor's Name		***************************************
	10654 A St. Charles Rock Road St. Ann, MO 63074	When was the debt incurred? 03/14	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	

☐ Yes

Other. Specify payday loan

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Debi	or 1 Crystal Hardin	Case number (if known)	
4.1 4	Cash America Pawn	Last 4 digits of account number	\$265.00
•	Nonpriority Creditor's Name 2616 Telegraph Road St. Louis, MO 63125	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify 2-13 payday loan	
4.1	Certegy	Lost 4 divite of account number	\$187.00
5	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ101.00
	PO Box 30046	When was the debt incurred?	
	Tampa, FL 33630 Number Street City State Zip Code	As of the date was file the claim in O	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	□ Conformat	
	Debtor 2 only	☐ Contingent	
	Debtor 1 and Debtor 2 only	☐ Unliquidated	
	At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	<u></u>	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify 11-13 bad check	
4.1 6	Charter	Last 4 digits of account number 1362	\$432.00
	Nonpriority Creditor's Name		
	P.O. Box 20939	When was the debt incurred?	
	Fermade, MI 48220 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify 2014 service	

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Debt	or 1 Crystal Hardin	Case number (if known)	
4.1 7	Charter Communications	Last 4 digits of account number 7406	\$309.00
	Nonpriority Creditor's Name C/O Credit Protection One Galleria Tower	When was the debt incurred?	
	Dallas, TX 75240 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify 4-07 service	
4.1 8	Dalin Dental	Last 4 digits of account number Crystal	\$3,282.60
	Nonpriority Creditor's Name 555 N. Ballas St. Louis, MO 63141	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify 8-13 medical bill	
4.1 q	Direct T.V.	Last 4 digits of account number 2223	\$220.64
<u> </u>	Nonpriority Creditor's Name P.O. Box 9001069	When was the debt incurred?	
	Larsville, KY 40290-1069 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify 12-13 service	
		· · · ·	

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Debi	or 1 Crystal Hardin	Case number (if known)	
4.2 0	Discover	Last 4 digits of account number 0257	\$1,534.32
	Nonpriority Creditor's Name C/O North Star PO Box 49	When was the debt incurred? 2-17	
	Bowmansville, NY 14026 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify credit card	
4.2 1	Division Of Employment Security Nonpriority Creditor's Name	Last 4 digits of account number 6402	\$4,620.00
	P.O. Box 3100 Jefferson City, MO 65104	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify 10-14 overpayment of benefits	
4.2 2	Federal Pacific	Last 4 digits of account number 9181	\$758.40
	Nonpriority Creditor's Name 800 SW 30th Auburn, WA 98071	When was the debt incurred? 8-1-18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify credit card	

Debto	Crystal Hardin	Case number (if known)	
4.2	First Community	Last 4 digits of account number 4206	\$2,000.00
	Nonpriority Creditor's Name 17151 Chesterfield Airport Chesterfield, MO 63005	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	<u> </u>	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify 6-13 signature loan	
4.2	First Premier Bank	Last 4 digits of account number 0258	\$800.00
	Nonpriority Creditor's Name		
	P.O. Box 5529	When was the debt incurred?	
	Sioux Falls, SD 57117 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , 	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	<u>_</u>	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify 9-12 credit card	
4.2	First Source	Last 4 digits of account number 5088	\$237.00
5	Nonpriority Creditor's Name		Ψ201.00
	7650 Magna Drive Belleville, IL 62223	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify 3-12 medical bill	

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Deb	tor 1 Crystal Hardin	Case number (if known)	
4.2 6	GM Financial	Last 4 digits of account number 5624	\$18,775.00
	Nonpriority Creditor's Name PO Box 183834	When was the debt incurred? 2012	
	Arlington, TX 76096 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	_	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify repossession	
4.2 7	Laclede Gas	Last 4 digits of account number 0000	\$813.00
	Nonpriority Creditor's Name	- <u> </u>	
	C/O Consumer Adjustment 4121 Union Road St. Louis, MO 63129	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	•	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify 12-11 service	
4.2 8	Laclede Gas	Last 4 digits of account number 0000	\$663.00
<u> </u>	Nonpriority Creditor's Name Drawer 2	When was the debt incurred?	
	St. Louis, MO 63171-2000 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	∏ vos	Other Courts 2014 Service	

Laclede Gas	Last 4 digits of account number 9520	\$
Nonpriority Creditor's Name		
Drawer 9	When was the debt incurred?	
St. Louis, MO 63166 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	7.6 of the date you me, the dam io. Officer all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify 10-14 service	
Mercy Clinic	Last 4 digits of account number 1113	\$2
Nonpriority Creditor's Name		
PO Box 6190	When was the debt incurred?	
Chesterfield, MO 63006 Number Street City State Zip Code	As of the date you file the claim is. Check all that each	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify 2012-2013 medical bills	
Mercy Clinic	Last 4 digits of account number mult accts	\$1
Nonpriority Creditor's Name	Last 4 digits of account number ————————————————————————————————————	Ψ'
PO Box 6190	When was the debt incurred?	
Chesterfield, MO 63006		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	□ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify 2013 medical bills	

Dept	or 1 Crystal Hardin	Case number (if known)	
4.3 2	Midwest Bank Centre	Last 4 digits of account number 5630	\$456.75
	Nonpriority Creditor's Name C/O Tek-Collect Inc.	When was the debt incurred?	
	871 Park Street Columbus, OH 43215 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify 10-12 overdraft	
1.3 3	Missouri Pay Day Loan Nonpriority Creditor's Name	Last 4 digits of account number	\$350.00
	10122 St. Charles Rock Road St. Ann, MO 63074	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify 9-13 payday loan	
I.3	Missouri Title Loan	Last 4 digits of account number 1801	\$331.50
-	Nonpriority Creditor's Name 6985 Olive Blvd	When was the debt incurred?	
	St. Louis, MO 63130 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam is. Oneon an that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify 5-13 credit card	
		-I	

Debt	tor 1 Crystal Hardin		Case number (if known)	
4.3 5	PNC Bank	Last 4 digits of account number	6263	\$176.00
	Nonpriority Creditor's Name PO Box 3429	When was the debt incurred?		
	Pittsburgh, PA 15230			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	_			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	Lateta	
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharir	g plans, and other similar debts	
	☐ Yes	■ Other. Specify 4-13 credit	card	
4.3 6	Prestige Financial Service	Last 4 digits of account number	8794	\$21,809.03
	Nonpriority Creditor's Name	_		
	1420 S. 500 West Salt Lake City, UT 84115	When was the debt incurred?	11-11 auto loan on 2007 Nissan Xterra (Fire loss)	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	Other. Specify located in S	St. Louis City tow yard	
4.3 7	Progressive Leasing	Last 4 digits of account number	7103	\$832.50
	Nonpriority Creditor's Name	- NAIben was the debt incorred?	12-18	
	256 W. Data Drive Draper, UT 84020	When was the debt incurred?	12-16	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir	a plane, and other similar debte	
	No		y pians, and other similar debts	
	Yes	Other. Specify service		

4.3			
8	Progressive Leasing	Last 4 digits of account number 4644	Unknown
	Nonpriority Creditor's Name 256 W. Data Drive Draper, UT 84020	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Service	
4.3	Quest Lab	Last 4 digits of account number A148	\$1,918.93
	Nonpriority Creditor's Name C/O American Medical 4 Westchester Plaza	When was the debt incurred?	
	Elmston, NY 70652 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify 5-14 medical bill	
4.4	Quest Lab	Last 4 digits of account number 1A82	\$972.69
	Nonpriority Creditor's Name C/O American Medical 4 Westchester Plaza	When was the debt incurred?	
	Elmston, NY 70652	_	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loans	
	Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	

■ No

☐ Yes

■ Other. Specify 2014 medical bill

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Pg 33 of 70 Case number (if known) Debtor 1 Crystal Hardin 4.4 **RAC Acceptance** mult accts \$6,636.00 Last 4 digits of account number Nonpriority Creditor's Name 3715 N. Lindbergh When was the debt incurred? St. Ann, MO 63074 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify 9-13 service ☐ Yes 4.4 Shop & Save \$87.46 Last 4 digits of account number Nonpriority Creditor's Name C/O Supervalu When was the debt incurred? 250 Park Center Boise, ID 83726 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify 10-12 bad check ☐ Yes 4.4 Shop & Save 4543 \$65.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 220068 When was the debt incurred? Kirkwood, MO 63122 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify 11-12 bad check

Sprint	Last 4 digits of account number	Unknov
Nonpriority Creditor's Name 6391 Sprint Parkway Overlland Park, KS 66251	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Service	
St. Louis Loan	Last 4 digits of account number	\$0.
Nonpriority Creditor's Name		Ψ0.
10111 W. Florissant St. Louis, MO 63136	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify payday loan	
St. Louis University	Last 4 digits of account number 3017	\$212.
Nonpriority Creditor's Name		
221 N. Grand Room 121 St. Louis, MO 63103	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	

☐ Yes

■ Other. Specify 5-08 charge account

Pg 35 of 70 Case number (if known) Debtor 1 Crystal Hardin 4.4 0856 \$189.00 St. Lukes Hospital Last 4 digits of account number Nonpriority Creditor's Name **C/O Computer Credit** When was the debt incurred? 640 W. 4th Street Winston-Salem, NC 27113 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify 4-13 medical bill ☐ Yes 4.4 0881 \$407.00 Sun Loan Last 4 digits of account number 8 Nonpriority Creditor's Name 9000 St. Charles Rock Road When was the debt incurred? St. Louis, MO 63114 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify 10-12 signature loan ☐ Yes 4.4 Target 5403 \$238.88 Last 4 digits of account number 9 Nonpriority Creditor's Name PO Box 038994 When was the debt incurred? Tuscaloosa, AL 35403 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify 12-13 credit card ☐ Yes

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Case number (if known)

Deni	Crystal Haruin	Case Humber (II known)	
4.5 0	University Dental	Last 4 digits of account number 1301	\$375.00
	Nonpriority Creditor's Name 7843 Olive Blvd	When was the debt incurred?	
	St. Louis, MO 63130 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify 3-13 medical bill	
4.5 1	Us Bank	Last 4 digits of account number 2812	\$469.00
	Nonpriority Creditor's Name		
	C/O Capital Management 6981/2 South Ogde St New York, NY 14206	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify 4-13 overdraft	
4.5 2	US Career Institute	Last 4 digits of account number 8427	\$1,341.75
	Nonpriority Creditor's Name 2001 Lowe Street Fort Collins, CO 80525	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes		
	L res	Other. Specify	

1-13 student loan

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Debtor	1 Crystal Hardin	Case number (if known)	
4.5	W. L. W.	0000	* 04.50
3	Valarity	Last 4 digits of account number 8260	\$24.58
	Nonpriority Creditor's Name PO Box 505023	When was the debt incurred?	
	St. Louis, MO 63150		_
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did n report as priority claims	ot
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify 10-12 medical bill	_
4.5	West County Radiological Group	Last 4 digits of account number 0232	\$33.19
4	Nonpriority Creditor's Name	Last 4 digits of account number U232	Ψ00.10
	11475 Olde Cabin Road, Ste. 200	When was the debt incurred?	
	St. Louis, MO 63141		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did n report as priority claims	ot
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify 10-13 medical bill	
	165	Other. Specify 10 10 medical 5m	
Part 3:			
is tryi have i	ng to collect from you for a debt you owe to s	about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For excomeone else, list the original creditor in Parts 1 or 2, then list the collection ago nat you listed in Parts 1 or 2, list the additional creditors here. If you do not have or submit this page.	ency here. Similarly, if you
	nd Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
AFNI PO F	Box 3517	Line 4.19 of (Check one):	
	nington, IL 61702	■ Part 2: Creditors with Nonpriority Unsecu	red Claims
		Last 4 digits of account number	
	nd Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
	est Alliance /est Eldordo	Line 4.2 of (Check one):	
	ur, IL 65222	■ Part 2: Creditors with Nonpriority Unsecu	red Claims
		Last 4 digits of account number	
Name a	nd Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
	world System	Line 4.50 of (Check one): □ Part 1: Creditors with Priority Unsecured	Claims
	rudental Road	■ Part 2: Creditors with Nonpriority Unsecu	red Claims
погъп	am, PA 19044	Last 4 digits of account number	

Part 4: Add the Amounts for Each Type of Unsecured Claim

^{6.} Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

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Debtor 1 Crystal Hardin

Case number (if known)

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 1,341.75
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 85,382.03
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 86,723.78

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Fill in this infor	mation to identify your	case:		
Debtor 1	Crystal Hardin			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	OF MISSOURI	
Case number (if known)				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	Company with Name, Number	whom you have the street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.4	<u> </u>				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	

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			Pa 40 of 70		
Fill in this info	rmation to identify your	case:			
Debtor 1	Crystal Hardin				
	First Name	Middle Name	Last Name		
Debtor 2	First Name	Middle News	Loot Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	EASTERN DISTRICT O	F MISSOURI		
Case number					
(if known)					☐ Check if this is an
					amended filing
عد: منات ا	400LL				
	orm 106H				
Schedul	e H: Your Cod	ebtors			12/15
ill it out, and n our name and	umber the entries in the case number (if known)		the Additional Page to	o this page. On the top	eeded, copy the Additional Page, of any Additional Pages, write
☐ Yes					
Arizona, Ca	alifornia, Idaho, Louisiana, o line 3.	lived in a community pr Nevada, New Mexico, Pu use, or legal equivalent live	erto Rico, Texas, Washi		states and territories include
3. In Column in line 2 ag	1, list all of your codebt gain as a codebtor only i D), Schedule E/F (Official	ors. Do not include your f that person is a guaran	spouse as a codebtor tor or cosigner. Make	sure you have listed th	g with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	mn 1: Your codebtor Number, Street, City, State and Zl	P Code		Column 2: The cre Check all schedule	ditor to whom you owe the debt s that apply:
3.1				☐ Schedule D, line	
Name				☐ Schedule E/F, li	
				☐ Schedule G, line	
Numb	er Street			_	
City		State	ZIP Code		
3.2 Name				Schedule D, line	
. tamo				☐ Schedule E/F, li ☐ Schedule G, line	
				— Schedule G, IIII6	
Numh	or Stroot				

State

City

ZIP Code

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Fill in this information	on to identify your case:	
Debtor 1	Crystal Hardin	
Debtor 2 (Spouse, if filing)		
United States Bank	ruptcy Court for the: EASTERN DISTRICT OF MISSOURI	
Case number (If known)		Check if this is: An amended filing
Official For	m 106l	A supplement showing postpetition chapter 13 income as of the following date: 2/18/2016 MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Describe Employment				
1.	Fill in your employment information.		Debto	r 1	Debtor 2 or non-filing spouse
	If you have more than one job,		■ Em	ployed	☐ Employed
	attach a separate page with information about additional	Employment status*	☐ Not	employed	■ Not employed
	employers.	Occupation	Temp		Disabled
	Include part-time, seasonal, or self-employed work.	Employer's name	Beac	on Hill Staffing	
	Occupation may include student or homemaker, if it applies.	Employer's address		owdoin Street on, MA 02108	
		How long employed th	nere?	2 months	
				*See Attachment for	Additional Employment Information

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 2,773.33 0.00 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. +\$ 3. 0.00 0.00 Calculate gross Income. Add line 2 + line 3. 0.00 2,773.33

Official Form 106I Schedule I: Your Income page 1

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Deb	otor 1	Crystal Hardin	-	•	Case	e number (if known)				
					Fo	r Debtor 1		Debtor -filing s		
	Cop	y line 4 here	4.		\$_	2,773.33	\$	iiiiig c	0.00	_
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	58	a.	\$	212.16	\$		0.00)
	5b.	Mandatory contributions for retirement plans	5k		\$	0.00	\$_		0.00	_
	5c.	Voluntary contributions for retirement plans	50	.	\$	0.00	\$		0.00	_
	5d.	Required repayments of retirement fund loans	50	d.	\$	0.00	\$		0.00	_
	5e.	Insurance	56	€.	\$	0.00	\$		0.00	_
	5f.	Domestic support obligations	5f		\$	0.00	\$		0.00	<u> </u>
	5g.	Union dues	50	j.	\$	0.00	\$		0.00	1
	5h.	Other deductions. Specify:	_ 5h	า.+	\$_	0.00	+ \$		0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		\$	212.16	\$		0.00	<u> </u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	2,561.17	\$		0.00)
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	88	a	\$	0.00	\$		434.24	
	8b.	Interest and dividends	8k		\$-	0.00	\$-		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	c .	\$_	0.00	\$		0.00	_ <u></u>
	8d.	Unemployment compensation	80	d.	\$_	0.00	\$		0.00	_
	8e.	Social Security	86	€.	\$_	0.00	\$	1,	,095.00	<u>) </u>
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Dependent SS Pension or retirement income	8f 8g		\$_ \$	595.00 0.00	\$		0.00	_
	8h.	Other monthly income. Specify:) 1.+	\$		+ \$		0.00	_
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	:	\$	595.00	\$,	1,529.2	4
	٠.	A				2.452.45				4 005 44
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		3,156.17 + \$_	1,5	529.24	= \$ -	4,685.41
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	dep			. •	,		e J. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certain lies						12.	\$	4,685.41
10	Do.	you expect on increase or decrease within the year often you file this forms	2						Combi month	ned ly income
13.	■	you expect an increase or decrease within the year after you file this form? No. Yes Evoluin:	r ——							

Official Form 106l Schedule I: Your Income page 2

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Debtor 1	Crystal Hardin	Case number (if known)
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Official Form B 6I Attachment for Additional Employment Information

Spouse		
Occupation	Part time job	
Name of Employer	Primerica	
How long employed		
Address of Employer		1099 job

Official Form 106l Schedule I: Your Income page 3

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Fill	in this informa	tion to identify yo	our case:						
Deb	otor 1	Crystal Hard	lin				if this is:		
	otor 2 ouse, if filing)					A		ving postpetition chapter the following date:	
Unit	ted States Bankr	uptcy Court for the	: EASTE	RN DISTRICT OF MISSO	OURI		2/18/2016 MM / DD / YYYY		
	se number	uptoy Court for the		THE PROPERTY OF THE CO.			, 55, 1111		
1	nown)								
O	fficial Fo	rm 106J							
		J: Your						12/15	5
info	ormation. If m		eded, atta	If two married people and the character is the character sheet to this in.					
Par		ibe Your House	hold						
1.	Is this a join								
	■ No. Go to	= .	in a senar	ate household?					
	□ No. □ No.		a copa.						
	□ Ye	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expense</i>	es for Separate House	ehold of Debto	or 2.		
2.	Do you have	e dependents?	□ No						
	Do not list De Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?	
	Do not state							□ No	
	dependents	names.			Child		12	■ Yes	
								□ No □ Yes	
								□ No	
								☐ Yes	
								□ No	
3.	Do your eyr	enses include	_					☐ Yes	
Э.	expenses of	f people other t d your depende	han $_{oldsymbol{\square}}$	No Yes					
		ate Your Ongoi							
exp				uptcy filing date unless y is filed. If this is a sup				pter 13 case to report f the form and fill in the	
the	value of such	n assistance an		government assistance luded it on <i>Schedule I</i> :			V		
(Of	ficial Form 10	6l.)					Your expe	enses	
4.		or home owners and any rent for th		ses for your residence. r lot.	. Include first mortgage	e 4. \$		1,136.00	
	If not includ	led in line 4:							
	4a. Real e	estate taxes				4a. \$		0.00	
		rty, homeowner's				4b. \$		0.00	
		maintenance, re owner's associat		ipkeep expenses		4c. \$ 4d. \$		0.00	
5.				our residence, such as h	nome equity loans	4u. ъ 5. \$		0.00	

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	Crystal I	iaiuiii		ber (if known	
6. Utilit	ties:				
6a.		heat, natural gas	6a.	\$	300.00
6b.	-	wer, garbage collection	6b.	\$	100.00
6c.	-	e, cell phone, Internet, satellite, and cable serv	ices 6c.		145.00
6d.	Other. Spe		6d.	\$	0.00
		ekeeping supplies	7.	\$	600.00
		hildren's education costs	8.	\$	0.00
		ry, and dry cleaning	9.	\$	180.00
	•	products and services	10.	\$	150.00
		ntal expenses	11.	: —	50.00
		Include gas, maintenance, bus or train fare.	11.	Φ	50.00
		ar payments.	12.	\$	150.00
		clubs, recreation, newspapers, magazines,		\$	200.00
		ributions and religious donations	14.	\$	0.00
5. Insu		insulions and rengious dentations	1-7.	Ψ	0.00
		surance deducted from your pay or included in	lines 4 or 20		
	Life insura		15a.	\$	0.00
	Health ins		15b.		0.00
	Vehicle in		15c.		212.00
		rance. Specify:	15d.	· —	0.00
		clude taxes deducted from your pay or include		–	0.00
		onal Property Tax	16.	\$	35.00
		ease payments:		*	33.33
		ents for Vehicle 1	17a.	\$	0.00
		ents for Vehicle 2	17b.	· —	0.00
	Other. Spe	acify:	17c		0.00
	Other. Spe		176. 17d.	·	0.00
		of alimony, maintenance, and support that		Ψ	0.00
		your pay on line 5, Schedule I, Your Income		\$	0.00
		s you make to support others who do not liv		\$	0.00
Spec			19.		
0. Oth e	er real prop	erty expenses not included in lines 4 or 5 o	f this form or on Schedule I: Yo	ur Income).
		s on other property	20a.		0.00
20b.	Real estat	e taxes	20b.	\$	0.00
20c.	Property, I	nomeowner's, or renter's insurance	20c.	\$	0.00
		ice, repair, and upkeep expenses	20d.	\$	0.00
		er's association or condominium dues	20e.		0.00
	er: Specify:	Cell Phone	21.	· —	300.00
5	opcony.	Och I HOHE		.Ψ	300.00
	-	monthly expenses			
	Add lines 4	•		\$	3,558.00
22b.	Copy line 2	2 (monthly expenses for Debtor 2), if any, from	Official Form 106J-2	\$	
22c.	Add line 22	a and 22b. The result is your monthly expense	es.	\$	3,558.00
				-	3,000.00
		monthly net income.		_	
		12 (your combined monthly income) from Sche			4,685.41
23b.	Copy your	monthly expenses from line 22c above.	23b.	-\$	3,558.00
_					
23c.		our monthly expenses from your monthly incor		\$	1,127.41
	The result	is your monthly net income.	23c.	Ψ	1,121.41
24. Do v	IOU OVDOCE	on increase or decrease in your expenses of	vithin the year after you file this	form?	
		an increase or decrease in your expenses we are increase or decrease in your expenses we expense such that the			ocrease or decrease because of a
	w on alonexs		, oa. or do jou orpoot your mortgage p	- Symbolic to III	.s. saso or accrease because or a
For e		terms of your mortgage?			
For e	fication to the	terms of your mortgage?			

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Fill in this infor	mation to identify your	case:			
Debtor 1	Crystal Hardin				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
(Spouse II, IIIIIIg)	First Name	wilddie Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MISSOURI		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official Form					
Declarat	tion About a	ın Individual	Debtor's S	Schedules	12/15
	is U.S.C. §§ 152, 1341, 1	519, and 3571.			
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill o	ut bankruptcy forms?	
■ No					
☐ Yes. I	Name of person				nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
•	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules	filed with this declaration	on and
X /s/ Crv	stal Hardin		X		
	al Hardin		Signature	e of Debtor 2	
Signatu	ire of Debtor 1				
Date	October 29, 2019		Date		

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Fill in this information to identify your case:	
Debtor 1 Crystal Hardin	
First Name Middle Name Last Name Debtor 2	
(Spouse if, filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: EASTERN DISTRICT OF MISSOURI	
Case number	
(if known)	☐ Check if this is an
	amended filing
Official Forms 407	
Official Form 107	Dankminter
Statement of Financial Affairs for Individuals Filing for	
Be as complete and accurate as possible. If two married people are filing together, both a information. If more space is needed, attach a separate sheet to this form. On the top of a	
number (if known). Answer every question.	
Part 1: Give Details About Your Marital Status and Where You Lived Before	
1. What is your current marital status?	
Married	
■ Married□ Not married	
2. During the last 3 years, have you lived anywhere other than where you live now?	
No	
Yes. List all of the places you lived in the last 3 years. Do not include where you live no	ow.
Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address Debtor 2 Prior Address	Address: Dates Debtor 2
612 West Bridge Drive From-To: ☐ Same as Debto	_
Saint Peters, MO 63376 2013-2018	From-To:
 Within the last 8 years, did you ever live with a spouse or legal equivalent in a comme states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). 	
Part 2 Explain the Sources of Your Income	
4. Did you have any income from employment or from operating a business during this Fill in the total amount of income you received from all jobs and all businesses, including pall you are filing a joint case and you have income that you receive together, list it only once	art-time activities.
_	
□ No	
□ No ■ Yes. Fill in the details.	Dahtar 2
□ No ■ Yes. Fill in the details. Debtor 1	Debtor 2 Sources of income Gross income
□ No ■ Yes. Fill in the details.	Sources of income Gross income
□ No ■ Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and	Sources of income Check all that apply. Gross income (before deductions and exclusions)

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1 Crystal Hardin Pg 48 of 70 Case number (if known)

				Debtor 1					Debtor 2		
					of income that apply.	(bef	ss income ore deductions a usions)	and	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	r last caler anuary 1 to	dar year: December	31, 2018)	■ Wages	, commissions,		\$14,831	1.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operat	ing a business				☐ Operating a	business	
		dar year be December		■ Wages	, commissions,		\$17,568	3.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operat	ing a business				☐ Operating a	business	
	winnings. List each	İf you are fili	ng a joint cas	e and you h	ental income; inter nave income that y ch source separat	ou rec	eived together,	list it on	ly once under De	ebtor 1.	I gambling and lottery
				Debtor 1					Debtor 2		
				Sources of Describe b		eac (bef	ss income from h source ore deductions a usions)		Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	yments You	Made Befo	re You Filed for	Bankrı	ıptcy				
6.	Are either ☐ No.	Neither De individual puring the No.	ebtor 1 nor D primarily for a 90 days befo Go to line 7 List below e paid that cre not include	personal, fare you filed . each credito editor. Do no payments to	amily, or househol for bankruptcy, di r to whom you pai	imer de la purpe de you pur de a tota tota tota tota tota tota tota t	ebts. Consumerose." oay any creditor al of \$6,825* or a domestic supporkruptcy case.	a total more in t obliga	of \$6,825* or mor one or more pay tions, such as ch	re? rments and th ild support ar	(8) as "incurred by an e total amount you and alimony. Also, do
	■ Yes.	Debtor 1 c	or Debtor 2 o	r both have	e primarily consu for bankruptcy, di	ımer d	ebts.			·	
		■ No.	Go to line 7								
		□ Yes		ments for do							creditor. Do not nclude payments to ar
	Creditor	s Name and	d Address		Dates of payme	nt	Total amou		Amount you	Was this p	ayment for
							pa	aid	still owe		

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Debtor 1 Crystal Hardin Pg 49 of 70 Case number (if known)

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider.						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment	
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider			ny property on a	ccount of a de	ebt that benefited an	
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name	
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures					
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title					t or custody	
	Case number Arrow Finance vs. Crystal Hardin	civil	St. Louis City		■ Pending		
	#1422-AC00965				☐ On appe		
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		erty repossessed, f	oreclosed, garnis	shed, attached	l, seized, or levied?	
	Creditor Name and Address	Describe the Property				Value of the	
		Explain what happened	i			property	
	Arrow Finance 3528 Hampton Ave. St. Louis, MO 63139	☐ Property was reposse ☐ Property was foreclos ☐ Property was garnish ☐ Property was attached	ed. ed.	2019	•	\$7,358.68	
11.	Within 90 days before you filed for bankrul accounts or refuse to make a payment bed No Yes. Fill in the details.		luding a bank or fir	nancial institution	n, set off any a	mounts from your	
	Creditor Name and Address	Describe the action the creditor took Date action was taken					
				taken			

Case number (if known) Debtor 1 Crystal Hardin 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? Nο ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of transferred or transfer was Address payment Email or website address made Person Who Made the Payment, if Not You Robert E. Faerber 10-24-19 \$500.00 230 S. Bemiston, Suite 600 Clayton, MO 63105 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment made

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18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

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	transferred in the ordinary course of your linclude both outright transfers and transfers include gifts and transfers that you have alrea No Yes. Fill in the details.	nade as security (such as	s the granting of	a security in	terest or mortgage on you	ur property). Do not
	Person Who Received Transfer Address	Description and property transfe		paym	ribe any property or lents received or debts in exchange	Date transfer was made
	Person's relationship to you					
 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you a beneficiary? (These are often called asset-protection devices.) No 						e of which you are a
	Yes. Fill in the details.					
	Name of trust	Description and	I value of the pro	operty trans	sferred	Date Transfer was made
Par	18: List of Certain Financial Accounts, In	nstruments, Safe Depos	sit Boxes, and S	Storage Uni	ts	
	 Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No 					
	Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Bank Of America	xxxx-0	■ Checking □ Savings □ Money Ma □ Brokerage □ Other		4/19	\$0.00
	Do you now have, or did you have within 1 cash, or other valuables? No Yes, Fill in the details.	year before you filed fo	or bankruptcy, a	any safe de	posit box or other depo	esitory for securities,
		M/h = alaa h = d =	1- 110	D	46 4 4 -	D ('11
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit	or place other than you	ur home within	1 year befo	re you filed for bankrup	tcy?
■ No						
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number,		Describe	the contents	Do you still have it?

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Crystal Hardin

Case number (if known)

Debtor 1 Crystal Hardin

Case number (if known)

Par	t 9:	Identify Property You Hold or Control for S	Someone Else					
23.		you hold or control any property that someon someone.	ne else owns? Include any proper	ty y	ou borrowed from, are storing fo	r, or hold in trust		
		No						
		Yes. Fill in the details.						
	_	vner's Name dress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	scribe the property	Value		
Par	t 10:	Give Details About Environmental Informa	ition					
For	the	purpose of Part 10, the following definitions a	apply:					
	tox	vironmental law means any federal, state, or l ic substances, wastes, or material into the ai ulations controlling the cleanup of these sub	r, land, soil, surface water, ground	_	•			
		e means any location, facility, or property as o own, operate, or utilize it, including disposal s	-	law,	whether you now own, operate,	or utilize it or used		
		zardous material means anything an environr ardous material, pollutant, contaminant, or s		s wa	ste, hazardous substance, toxic	substance,		
Rep	ort a	all notices, releases, and proceedings that yo	u know about, regardless of wher	n the	ey occurred.			
24.	Has	s any governmental unit notified you that you	may be liable or potentially liable	unc	der or in violation of an environm	ental law?		
		No Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	d	Environmental law, if you know it	Date of notice		
25.								
		No Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	d	Environmental law, if you know it	Date of notice		
26.	Hav	ve you been a party in any judicial or adminis	trative proceeding under any envi	ironı	mental law? Include settlements	and orders.		
		No						
		Yes. Fill in the details.						
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case		
Par	t 11:	Give Details About Your Business or Conr	nections to Any Business					
27.	Wit	— hin 4 years before you filed for bankruptcy, d	lid vou own a business or have ar	ıv of	the following connections to an	v business?		
			•	-	-	,		
 □ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time □ A member of a limited liability company (LLC) or limited liability partnership (LLP) 								
		☐ A partner in a partnership	(, ee	- (*	 - ,			
		☐ An officer, director, or managing executi	ive of a cornoration					
		☐ An owner of at least 5% of the voting or	•					
		- An owner or at least 3/8 of the voting of	equity securities or a corporation					

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Deb	otor 1	Crystal Hardin	Pg 53 of 70	Case number (if known)
	.	No. None of the above applies. Go to F	Part 12.	
		Yes. Check all that apply above and fill	in the details below for each business	
	Add	iness Name ress ber, Street, City, State and ZIP Code)	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
	(Italiii	ber, offeet, only, offate and 211 code)	Name of accountant or bookkeeper	Dates business existed
28.	instit	in 2 years before you filed for bankrupt utions, creditors, or other parties. No Yes. Fill in the details below.	cy, did you give a financial statement t	o anyone about your business? Include all financial
	Nam Addi (Numl	-	Date Issued	
Part	t 12:	Sign Below		
are t	rue ai a bar	nd correct. I understand that making a		d I declare under penalty of perjury that the answers or obtaining money or property by fraud in connection years, or both.
/s/ (Cryst	tal Hardin		
•		Hardin e of Debtor 1	Signature of Debtor 2	
Date	e O	ctober 29, 2019	Date	
Did y	you at	ttach additional pages to Your Stateme	ent of Financial Affairs for Individuals F	Filing for Bankruptcy (Official Form 107)?

■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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			1 9 3 4 01 70	
Fill in this infor	rmation to identify your cas	se:		
Debtor 1				
Debior	Crystal Hardin First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the: _E	ASTERN DISTR	CICT OF MISSOURI	
Case number				
(if known)				☐ Check if this is an amended filing
			viduals Filing Under Chapto	er 7 12/15
creditors have	ve claims secured by your	property, or		
You must file th	ever is earlier, unless the c	in 30 days after	ot expired. you file your bankruptcy petition or by the date se e time for cause. You must also send copies to th	
	people are filing together in and date the form.	a joint case, bo	th are equally responsible for supplying correct i	nformation. Both debtors must
	and accurate as possible.		needed, attach a separate sheet to this form. On	the top of any additional pages,
Part 1: List Y	∕ ∕our Creditors Who Have S	ecured Claims		
		1 of Schedule D	: Creditors Who Have Claims Secured by Propert	y (Official Form 106D), fill in the
information b	pelow. reditor and the property that	is collateral	What do you intend to do with the property tha	
			secures a debt?	as exempt on Schedule C?
Creditor's			☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	
Description	£		☐ Retain the property and enter into a	☐ Yes
Description of property	I		Reaffirmation Agreement.	
securing debt	t:		☐ Retain the property and [explain]:	_
Creditor's			☐ Surrender the property.	□ No
name:			☐ Retain the property and redeem it.	
Description of	f		☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property			☐ Retain the property and [explain]:	
securing debt	t:			_
Creditor's			☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	
Description of	f		Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property			☐ Retain the property and [explain]:	

Official Form 108

Creditor's

securing debt:

Statement of Intention for Individuals Filing Under Chapter 7

 \square Surrender the property.

☐ No

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Debtor 1	Crystal Hardin	Case number (if known	n)
name: Descrip property securing	у	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	□ Yes
or any ur n the info	rmation below. Do not list real est	perty Leases hat you listed in Schedule G: Executory Contracts and Unexpir ate leases. Unexpired leases are leases that are still in effect; tl perty lease if the trustee does not assume it. 11 U.S.C. § 365(p)	ne lease period has not yet ended.
Describe	your unexpired personal property	leases	Will the lease be assumed?
Lessor's n Descriptio Property:	name: on of leased		□ No
Lessor's n Descriptio Property:	name: n of leased		□ No
Lessor's n Descriptio Property:	name: on of leased		□ No □ Yes
Lessor's n Descriptio Property:	name: n of leased		□ No
Lessor's n Descriptio Property:	name: n of leased		□ No
Lessor's n Descriptio Property:	name: n of leased		□ No
Lessor's n Descriptio Property:	name: n of leased		□ No
	Sign Below		☐ Yes
	nalty of perjury, I declare that I hav hat is subject to an unexpired leas	e indicated my intention about any property of my estate that see.	ecures a debt and any personal
Crys	crystal Hardin stal Hardin ature of Debtor 1	X Signature of Debtor 2	

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Fill	in this information to identify you	ır case:					lirected in	n this form and in	Form
Del	otor 1 Crystal Hardin				22A-1S	upp:			
	otor 2 buse, if filing)				■ 1. 7	here is no pres	umption	of abuse	
Uni	ted States Bankruptcy Court for	the: Eastern District	of Misso	uri		applies will be n	nade und	nine if a presumpt der <i>Chapter 7 Me</i>	
	se number				_	Calculation (Off		,	
(II KI	lown)							t apply now beca but it could apply	
∩f	ficial Form 122A -	1			☐ Ch	eck if this is a	n amen	ded filing	
	napter 7 Statemer		urren	t Monthly In	com	e			12/15
	<u> </u>								
attac case	s complete and accurate as possi th a separate sheet to this form. In number (if known). If you believe ifying military service, complete a	nclude the line number to that you are exempted to	o which the	he additional information esumption of abuse bec	n applies ause you	. On the top of a do not have pring	ny addition	onal pages, write y nsumer debts or b	our name and ecause of
•	t 1: Calculate Your Currer		mpaonin	om i resumption of Abu.	se Onder	\$ 707(B)(2) (OIIII	ciai i Oilii	122A-13upp) with	una ioini.
1.	What is your marital and filir	ng status? Check one	only.						
	☐ Not married. Fill out Colum	nn A, lines 2-11.	-						
	☐ Married and your spouse	is filing with you. Fill	out both	Columns A and B, line	es 2-11.				
	■ Married and your spouse	is NOT filing with yo	u. You a	nd your spouse are:					
	Living in the same hou	sehold and are not le	gally se	parated. Fill out both C	Columns	A and B, lines 2	2-11.		
	☐ Living separately or are	• • •		· · · · · · · · · · · · · · · · · · ·				•	
	penalty of perjury that yelliving apart for reasons							t you and your sp	ouse are
1 tl	Fill in the average monthly income 01(10A). For example, if you are filing the 6 months, add the income for all 6	ng on September 15, the 6 6 months and divide the to	6-month peotal by 6. F	eriod would be March 1 the Fill in the result. Do not inc	rough Aug lude any	gust 31. If the amoint m	ount of you ore than o	ur monthly income vonce. For example,	raried during if both
S	pouses own the same rental propert	y, put the income from the	it property	in one column only. If you	Colui		Colum) .
					Debt		Debto		
2.	Your gross wages, salary, ti payroll deductions).	ps, bonuses, overtim	e, and c	ommissions (before a	II \$	1,726.32	\$	0.00	
3.	Alimony and maintenance p Column B is filled in.	ayments. Do not inclu	de paym	ents from a spouse if	\$	0.00	\$	0.00	
4.	All amounts from any source of you or your dependents, i								
	from an unmarried partner, me	embers of your househ	old, your	dependents, parents,					
	and roommates. Include regulation filled in. Do not include payme			only if Column B is not	\$	0.00	\$	0.00	
5.		a business, professio	n, or far						
	Gross receipts (before all	\$ 0.00		Debtor 2 559.24					
	deductions) Ordinary and necessary	· ———	- · —						
	operating expenses Net monthly income from a	-\$ 0.00	<u> </u>	125.00 Copy					
	business, profession, or farm	\$ 0.00	\$	434.24 here -	>\$	0.00	\$	434.24	
6.	Net income from rental and	other real property		Dobtor 4					
	Gross receipts (before all dedu	uctions)	\$	Debtor 1 0.00					
	Ordinary and necessary opera	,	-\$	0.00					
	Net monthly income from renta	•	, \$ <u> </u>	0.00 Copy here	->\$	0.00	\$	0.00	
7.					\$	0.00	\$	0.00	

Official Form 122A-1

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Debtor 1 Crystal Hardin Case number (if known)

					Column A Debtor 1		Column B Debtor 2 or non-filing s		
Ω	Unami	ployment compensation			\$	0.00	\$	0.00	
0.		enter the amount if you contend that the amount	t received was a hene	efit under	Ψ	0.00	Ψ	0.00	
	the So	cial Security Act. Instead, list it here:							
	For y	you\$.00					
_		your spouse \$.00					
	benefit	on or retirement income. Do not include any an under the Social Security Act.			\$	0.00	\$	0.00	
10	Do not receive		Security Act or payme manity, or internationa a separate page and p	nts al or	\$	0.00	\$	0.00	
		•			\$	0.00	\$	0.00	
		Total amounts from separate pages, if any.			· ———		\$		
		Total amounts from separate pages, if any.		+	\$	0.00	Φ	0.00	
11		ate your total current monthly income. Add lir olumn. Then add the total for Column A to the to		\$	1,726.32	+ \$ _	434.24	= \$	2,160.56
								Total cu income	rrent monthly
Par	2:	Determine Whether the Means Test Applies t	o You						
12		ate your current monthly income for the year							
	12a. C	opy your total current monthly income from line 1	11		Cop	y line 11 l	nere=>	\$	2,160.56
	М	ultiply by 12 (the number of months in a year)						x 12	
	12b. TI	ne result is your annual income for this part of the	e form				12b	. \$2	5,926.72
13	Calcul	ate the median family income that applies to	you. Follow these ste	ps:					
	Fill in t	he state in which you live.	МО						
	Fill in t	ne number of people in your household.	3						
	Fill in t	he median family income for your state and size	of household.				13.	\$ 7	2,980.00
		a list of applicable median income amounts, go form. This list may also be available at the bank		specified	in the separa	ate instruc	tions		
14	How d	o the lines compare?							
	14a.	■ Line 12b is less than or equal to line 13. O Go to Part 3.	n the top of page 1, c	heck box	1, There is i	no presum	nption of abus	e.	
	14b.	Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2	2, The pre	esumption of	abuse is	determined by	/ Form 122	2A-2.
Par	3:	Sign Below							
	B	y signing here, I declare under penalty of perjury	that the information of	on this sta	atement and	in any atta	achments is tr	ue and co	rrect.
						•			
	X	/s/ Crystal Hardin Crystal Hardin							
		Signature of Debtor 1							
	Date	October 29, 2019							
		MM / DD / YYYY							
	lf	you checked line 14a, do NOT fill out or file Forn	n 122A-2.						
	If	you checked line 14b, fill out Form 122A-2 and f	ile it with this form.						

Debtor 1 Crystal Hardin Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 04/01/2019 to 09/30/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Accountemps

Income by Month:

6 Months Ago:	04/2019	\$2,318.40
5 Months Ago:	05/2019	\$3,974.40
4 Months Ago:	06/2019	\$2,517.12
3 Months Ago:	07/2019	\$0.00
2 Months Ago:	08/2019	\$0.00
Last Month:	09/2019	\$0.00
	Average per month:	\$1,468.32

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Beacon Hill

Income by Month:

6 Months Ago:	04/2019	\$0.00
5 Months Ago:	05/2019	\$0.00
4 Months Ago:	06/2019	\$0.00
3 Months Ago:	07/2019	\$0.00
2 Months Ago:	08/2019	\$0.00
Last Month:	09/2019	\$1,548.00
	Average per month:	\$258.00

Debtor 1 Crystal Hardin Case number (if known)

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 04/01/2019 to 09/30/2019.

Line 5 - Income from operation of a business, profession, or farm

Source of Income: **Business** Income/Expense/Net by Month:

into into a Linponso, i ve	Date	Income	Expense	Net
6 Months Ago:	04/2019	\$634.66	\$125.00	\$509.66
5 Months Ago:	05/2019	\$536.27	\$125.00	\$411.27
4 Months Ago:	06/2019	\$521.24	\$125.00	\$396.24
3 Months Ago:	07/2019	\$764.06	\$125.00	\$639.06
2 Months Ago:	08/2019	\$612.20	\$125.00	\$487.20
Last Month:	09/2019	\$286.99	\$125.00	\$161.99
_	Average per month:	\$559.24	\$125.00	
			Average Monthly NET Income:	\$434.24

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

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most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

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Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-46834 Doc 1 Filed 10/30/19 Entered 10/30/19 15:07:37 Main Document Pg 64 of 70

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of Missouri

In re	Crystal Hardin	1		Case No		
			Debtor(s)	Chapter	7	
	DIS	CLOSURE OF COME	PENSATION OF ATTO	RNEY FOR I	DEBTOR(S)	
	compensation paid to	o me within one year before the	016(b), I certify that I am the attor filing of the petition in bankruptcy on of or in connection with the ba	y, or agreed to be pa	d to me, for services render	red or to
	For legal service	es, I have agreed to accept		\$	500.00	
	Prior to the filin	ig of this statement I have receiv	red	\$	500.00	
	Balance Due			\$	0.00	
2.	The source of the cor	mpensation paid to me was:				
	Debtor	☐ Other (specify):				
3.	The source of compe	ensation to be paid to me is:				
	Debtor	☐ Other (specify):				
4.	■ I have not agreed	d to share the above-disclosed co	ompensation with any other person	n unless they are me	mbers and associates of my	law firm.
			ensation with a person or persons names of the people sharing in th			irm. A
5.	In return for the above	ve-disclosed fee, I have agreed t	o render legal service for all aspec	cts of the bankruptcy	case, including:	
į	 b. Preparation and fi 	filing of any petition, schedules, f the debtor at the meeting of cre	endering advice to the debtor in de statement of affairs and plan whice ditors and confirmation hearing, a	h may be required;		cy;
6.	By agreement with the	he debtor(s), the above-disclosed	d fee does not include the following	ng service:		
			CERTIFICATION			
	I certify that the foregonkruptcy proceeding		f any agreement or arrangement for	or payment to me for	representation of the debto	r(s) in
	October 29, 2019		/s/ Robert Faerb	er		
	Pate		Robert Faerber	<u>. </u>		
			Signature of Attorn	ney		
			Robert Faerber 230 S. Bemistion	n		
			Suite 600	.•		
			Saint Louis, MO			
				Fax: (314)727-699	2	
			faerber@msn.co	om		
			Name of law firm			

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United States Bankruptcy Court Eastern District of Missouri

In re	Crystal Hardin		Case No.	
		Debtor(s)	Chapter	7
	VERI	FICATION OF CREDITOR MAT	ΓRIX	
contai compl	ning the names and addresses of	reby certifies/certify under penalty of my creditors (Matrix), consisting of		
		/s/ Crystal Hardin		
		Crystal Hardin		
		Debtor		
		Dated: October 29, 2	019	

AAA Community Finance 10824 St. Charles Rock Overland, MO 63074

Advance America 10591 St. Charles Rock Road St. Ann, MO 63074

AFNI P.O. Box 3517 Bloomington, IL 61702

Ameren C/O Consumer ADT Co. 4121 Union Rd., Ste. 201 St. Louis, MO 63129

Ameren Missouri P.O. Box 88068 Chicago, IL 60680-1068

Ameri Cash Loans PO Box 184 Des Plaines, IL 60016

American Water P.O. Box 94551 Palatine, IL 60094-4551

ARC 2425 E. Thomas Road Phoenix, AZ 85016

Arrow Finance 3528 Hampton Ave. St. Louis, MO 63139

Arrow Finance 3528 Hampton St. Louis, MO 63139

AT&T PO Box 537104 Atlanta, GA 30353

Aveta C/O Transworld 507 Prudential Horsham, PA 19044

Brish 9417 Princess Tampa, FL 33619 Cash Advance 10654 A St. Charles Rock Road St. Ann, MO 63074

Cash America Pawn 2616 Telegraph Road St. Louis, MO 63125

Certegy PO Box 30046 Tampa, FL 33630

Charter P.O. Box 20939 Fermade, MI 48220

Charter Communications C/O Credit Protection One Galleria Tower Dallas, TX 75240

Dalin Dental 555 N. Ballas St. Louis, MO 63141

Direct T.V. P.O. Box 9001069 Larsville, KY 40290-1069

Discover C/O North Star PO Box 49 Bowmansville, NY 14026

Division Of Employment Security P.O. Box 3100 Jefferson City, MO 65104

Federal Pacific 800 SW 30th Auburn, WA 98071

First Community 17151 Chesterfield Airport Chesterfield, MO 63005

First Premier Bank P.O. Box 5529 Sioux Falls, SD 57117

First Source 7650 Magna Drive Belleville, IL 62223 GM Financial PO Box 183834 Arlington, TX 76096

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Laclede Gas C/O Consumer Adjustment 4121 Union Road St. Louis, MO 63129

Laclede Gas
Drawer 2
St. Louis, MO 63171-2000

Laclede Gas
Drawer 9
St. Louis, MO 63166

Mercy Clinic PO Box 6190 Chesterfield, MO 63006

Mercy Clinic PO Box 6190 Chesterfield, MO 63006

Midwest Alliance 306 West Eldordo Decatur, IL 65222

Midwest Bank Centre C/O Tek-Collect Inc. 871 Park Street Columbus, OH 43215

Missouri Department Of Revenue PO Box 475 Jefferson City, MO 65105

Missouri Pay Day Loan 10122 St. Charles Rock Road St. Ann, MO 63074

Missouri Title Loan 6985 Olive Blvd St. Louis, MO 63130

PNC Bank PO Box 3429 Pittsburgh, PA 15230 Prestige Financial Service 1420 S. 500 West Salt Lake City, UT 84115

Progressive Leasing 256 W. Data Drive Draper, UT 84020

Progressive Leasing 256 W. Data Drive Draper, UT 84020

Quest Lab C/O American Medical 4 Westchester Plaza Elmston, NY 70652

Quest Lab C/O American Medical 4 Westchester Plaza Elmston, NY 70652

RAC Acceptance 3715 N. Lindbergh St. Ann, MO 63074

Shop & Save P.O. Box 220068 Kirkwood, MO 63122

Shop & Save C/O Supervalu 250 Park Center Boise, ID 83726

Sprint 6391 Sprint Parkway Overlland Park, KS 66251

St. Louis Loan 10111 W. Florissant St. Louis, MO 63136

St. Louis University 221 N. Grand Room 121 St. Louis, MO 63103

St. Lukes Hospital C/O Computer Credit 640 W. 4th Street Winston-Salem, NC 27113

Sun Loan 9000 St. Charles Rock Road St. Louis, MO 63114 Target PO Box 038994 Tuscaloosa, AL 35403

Transworld System 507 Prudental Road Horsham, PA 19044

University Dental 7843 Olive Blvd St. Louis, MO 63130

Us Bank C/O Capital Management 6981/2 South Ogde St New York, NY 14206

US Career Institute 2001 Lowe Street Fort Collins, CO 80525

Valarity PO Box 505023 St. Louis, MO 63150

West County Radiological Group 11475 Olde Cabin Road, Ste. 200 St. Louis, MO 63141